

RURAL DISTRICT OF WAYLAND

THE

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

TOGETHER WITH

THE

REPORTS

OF THE

PUBLIC HEALTH INSPECTORS

AND

WATERWORKS ENGINEER.

1961.

S T A F F .

Medical Officer of Health:

A.S. DUNN.

L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H., D.C.H.

Public Health Inspector and
Inspector under Petroleum Acts.

A.T. BOORE.

F.A.P.H.I., M.R.S.H.

(Also holds the Certificate for the Inspection
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Additional Public Health Inspector:

A.E. SHELDRAKE.

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Pupil Public Health Inspector:

A.G. WEBSTER.

Chief Waterworks Engineer:

M.G.M. SHORT.

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Committees concerned with matters of Public Health:

WATER AND SEWERAGE COMMITTEE.

PUBLIC HEALTH COMMITTEE.

HOUSING COMMITTEE.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Report for the year 1961.

Your obedient Servant,

A.S. Dunn.

Vital Statistics.

Estimated population, mid-year 1961 : 19,970.

Births: 304 Deaths: 173

Live Births: 299 Legitimate still births 5

Still Births: 5 Illegitimate Live births 12

Deaths in Infancy: 4, all legitimate children.

Illegitimate births formed 4% of all births (E. & W. 5.9%).

Death Rate (Crude): 8.7 Birth Rate (Crude): 15.0

Death Rate (adjusted): 8.7 Birth Rate (adjusted): 19.2

(Adjusted rates are to be used in comparing districts with each other;
they may also be compared with the national rate.)

Comparative Table.

	<u>Rate #</u>	<u>Wayland</u> <u>R.D.</u>	<u>Norfolk.</u>	<u>England.</u>
Birth		19.2	17.9	17.4
Death		8.7	10.8	12.0
Maternal mortality		Nil.	0.8	0.3
Stillbirth		16.4	15.6	18.7
Neonatal mortality		10.0	13.5	15.5
Perinatal mortality		26.8	27.2	32.2
Legitimate Infant mortality		13.9	19.4	Not available
Illegitimate Infant mortality		Nil	17.1	Not available.
Infant mortality		13.4	19.3	21.4
Early neonatal mortality		10.0	11.8	32.2

For definitions see Appendix B.

Comment.

The basic statistical indices of the health of a community are: birth rate, death rate, and infant mortality rate. The District shows up well on all three counts.

The illegitimacy percentage at 4 compares favourably with the national 5.9. This last however is distressingly high:- of every seventeen children born in England, one is illegitimate.

The stillbirth rate was a little better than the national level. The same is true of infant mortality. There ~~were~~ no maternal deaths. The suggestion therefore is that the care of mother and child in pregnancy, at confinement and in the lying-in-period is good.

Infant Deaths.

One premature child died a few minutes after birth. Another died within an hour of birth from collapse of the lungs, due to inhaling fluid while in the birth canal. The third neonatal death was due to brain damage sustained before **or** during delivery. An older child died from asphyxia due to regurgitation of stomach contents.

Stillbirths.

Three of these could be attributed to maternal toxæmia, and one to the child's having a heart defect incompatible with survival. In the remaining case the cause of stillbirth was not discovered. In only one case might the outcome have been different: the mother had toxæmia and refused to co-operate in treatment. The records show that the quality of care afforded all these mothers was high: these stillbirths therefore must in our present state of knowledge be regarded as unavoidable deaths.

Deaths.

<u>Causes of Death as Registered in 1961.</u>		
	<u>Male.</u>	<u>Female.</u>
1. Tuberculosis, respiratory	0	0
2. Tuberculosis, other	0	0
3. Syphilis	0	0
4. Diptheria	0	0
5. Whooping Cough	0	0
6. Meningococcal infections	0	0
7. Acute Poliomyelitis	0	0
8. Measles	0	0
9. Other infective and parasitic diseases	1	1

10 Malignant neoplasm, stomach	0	1
11. Malignant neoplasm, lung and bronchus	6	0
12. Malignant neoplasm, breast	0	3
13. Malignant neoplasm, uterus	0	2
14. Other Malignant Disease	8	7
15. Leukaemia aleukaemia	1	0

	<u>Male.</u>	<u>Female.</u>
16. Diabetes mellitus	0	0

17. Vascular lesions of nervous system	16	19
18. Coronary disease, angina	16	14
19. Hypertension with heart disease	0	0
20. Other heart disease	9	7
21. Other circulatory disease	13	7

22. Influenza	1	2
23. Pneumonia	5	1
24. Bronchitis	2	0
25. Other diseases of respiratory system	0	1

26. Ulcer of stomach and duodenum	1	0
27. Gastritis, enteritis and diarrhoea	1	0
28. Nephritis and nephrosis	1	1
29. Hyperplasia of prostate	2	0
30. Pregnancy	0	0
31. Congenital malformations	0	0
32. Other diseases	8	5
33. Motor vehicle accidents	2	1
34. All other accidents	2	4
35. Suicide	2	0
36. Homicide	0	0

MALE DEATHS: 97

FEMALE DEATHS: 76

Age at Death

	-1	1+	5+	10+	20+	30+	40+	50+	60+	70+	80+	90+	All
Male	3	3	0	0	2	1	5	3	19	35	25	2	98
Female	1	3	0	1	0	0	2	5	13	19	28	5	77
Total	4	6	0	1	2	1	7	8	32	54	53	7	175

Note :- There are discrepancies between these two tables. The causes of death table is issued from the Registrar General's Office.

Unfortunately no age breakdown is supplied with these figures thus the age pattern of death has to be constructed from local figures i.e. Local Registrar's returns plus deaths transferred into this District minus deaths transferred out. This tally comes to 175 deaths, but the Registrar General's figure is 173. As the Statistical Office will not investigate discrepancies of this order (indeed they expect them to occur occasionally) I can only suggest that their computer has allotted two of our figures to another District's total. The deathrate works out at 8.8 (crude) (using 175 as the total number of deaths, not appreciably different from the 8.7 yielded using the Registrar General's total of 173.

The usual pattern of death in Western society is demonstrable here: death is rare in youth and uncommon in middle age. Most can expect about seventy years, the womenfolk tending to have a rather longer life than the men. Major causes of death are those associated with the ageing process, the heart and blood vessels giving out after decades of constant use. Such are inevitable but in recent years, younger people have been dying of heart disease at an increasing rate. This experience is shared by all Western European and the North American countries. Men are by far more often the victims than are women. The mechanics of their end is that the coronary arteries which supply the heart muscle itself with nourishment become blocked. Why this happens is still obscure. Studies of the incidence of the disease show it to hit most often men in sedentary occupations, where there may not be any physical work involved but much nervous strain. A smoker is at greater risk than the non-smoker. Some evidence suggests the latter run only half as much chance of developing the disease.

Next to vascular disease in importance is the cancer group. Stated simply, cancer is the state resultant from cells in any organ deviating from blueprint when producing their own replacements. More-primitive cells with no useful function are formed; these multiply faster than normal cells and invade surrounding healthy tissue. Swept away in the blood streams, a few such cells can form secondary growths in other organs. Cure of cancer depends on early diagnosis and also on the degree of invasiveness shown by the aberrant cells. Prevention in the absence of knowledge of the ultimate fault, i.e. the reason for normal cell reproduction deviating from plan, rests on observing what conditions seem to increase the likelihood of a cancer developing and trying to remove them. Let me take lung cancer, now the commonest cancer, as an example.

Doctors noticed that lung cancer patients were often heavy smokers. The increase in deaths from lung cancer over the past forty years has been dramatic: cigarette consumption has also gone up considerably :-

Lung Cancer Deaths.			Cigarettes (as millions/lbs/tobacco).	
592	-	1920	-	80.3
1,654	-	1930	-	107.0
5,303	-	1940	-	161.1
13,598	-	1950	-	181.7
25,288	-	1961	-	243.1

Lung cancer is rare in the non-smoker, and steadily increases in incidence among smokers - the more cigarettes smoked the greater is the toll. Long-term studies show conclusively that future risk can be sharply reduced if the smoker gives up the habit no matter how long or how much he has indulged. Pipe smoking of equivalent tobacco quantities is much less dangerous. There is therefore a reasonable body of evidence that there is a causal relationship between smoking and lung cancer. Whether to act on the evidence is a matter for the individual.

The low death rate from infectious disease taken for granted in Britain today is in terms of history a recent development. In early Victorian England, four deaths in ten were of children less than five years old. In industrial areas, infant mortality rates of 150 per 1,000 were not unusual. Most working men could expect to lose at least one child. The overwhelming majority of such deaths were due to infectious diseases, aided by poverty and malnutrition. In underdeveloped countries today, they still account for half the death roll.

Tuberculosis.

No deaths locally from this cause in 1961. Eradication of tuberculosis from Great Britain is now possible within twenty years. Pulmonary tuberculosis would then go the way of bone tuberculosis, now a rarity yet twenty years ago it filled long stay hospitals. Pastourisation, and tuberculin testing of milk herds take the credit for a great saving of lives and prevention of crippling deformities.

Measures of control now practised are :-

- (i) registration of cases
- (ii) examination of their close contacts
- (iii) specialist treatment at chest clinics
- (iv) examination of youngsters leaving the school community for the adult world.
- (v) search for early cases among the apparently healthy general population (Mass X-Ray Survey).

to this should be added (vi) X-Ray examination of immigrants.

Recent surveys suggest that Indian/Pakistani immigrants may have an incidence of pulmonary tuberculosis of 25 per 1,000. On this basis, we imported about 1,000 active cases in 1961 from the Indian sub-continent. West Indian immigrants have a rate similar to our own and therefore give no cause for concern. Pressure from the British Medical Association has not moved the Government to act. We now have the odd situation where the Ministry of Health seems to find it worth while X-raying our general population to discover less than one case in a thousand volunteers, yet resists a vastly more productive survey of immigrants.

B.C.C. Vaccination is offered to school leavers. Like other immunisation procedures, it falls within that part of personal health services afforded by the County Council's Health Committee, Thetford Borough, Swaffham U.D. and R.D., and Wayland R.D., together cover an area which is an administrative unit for these services, Health Area 6. During the year, 201 children attending schools in these districts were vaccinated against tuberculosis.

Tuberculosis Register Wayland R.D.

Year	Respiratory T.B.			Non-Respiratory T.B.			Grand Total.
	Male	Female	Total	Male	Female	Total	
1961	47	39	86	29	17	46	132
1960	51	38	89	29	15	44	133
1959	50	38	88	30	17	47	135
1958	47	35	82	29	19	48	130

Smallpox.

This disease was introduced in December, the source being the Karachi outbreak which started the month before. No cases or contacts reached this district. Where cases did occur, the next casualty was common sense and there were bigger queues for vaccination than for bingo. Mass vaccination is not necessary for the control of smallpox outbreaks such as we experience in Britian. The technique in our situation is to "ring" each case i.e. trace and vaccinate all contacts of the patient, and then immediate contacts of these people. There is no need to go in ever widening circles from these to the general population. There are secondary objections to mass vaccination: massive sickness - absence from work; severe vaccination reactions may be confused with modified smallpox, the reverse being a situation fraught with danger. There is also the remote possibility of death from vaccination's complications. It is much more rational to employ trained staff on intensive contact tracing than on mass vaccination.

The outbreak brought after it open criticism of the official vaccination policy, which is to encourage the protection of all infants. The heretic view, which is mine, is that this policy is illogical. Even 100% infant vaccination, without revaccination throughout life at five year intervals, would not raise materially the immunity of the population as a whole. There would be on the basis of past experience some eight deaths per million vaccinated in the first year of life. The risks of vaccination are very much less after one year old; if parents wish the protection for their child, it should be done after the age. The belief that vaccination in infancy gives some measure of protection for life is not well-founded; revaccination at least every five years is necessary to keep the individual's immunity at a reliable level.

My own view is that general infant vaccination confers no real protection on the community, and as pre-school children are the least likely section of the populace to contact imported cases it is questionable whether the procedure is justifiable. Obviously those at greater risk e.g. port officials, sailors, dorctors, nurses, ambulance attendants should be vaccinated every five years.

In Health Area 6, 408 primary vaccinations and 88 revaccinations were performed in the year by general medical practitioners.

Poliomyelitis.

One case was notified, a Serviceman who at his own request had not been immunised. His family were protected. There were no further cases.

It was a quiet year generally, 1081 cases in England and Wales. The outbreak in Hull lasted about six weeks and accounted for 134 notifications. Poliomyelitis is usually most prevalent in late summer but the Yorkshire epidemic started in October.

Many millions of doses of both injection (Salk) and oral (Sabin) vaccine have now been used. It seems that this is one of the safest vaccination procedures and certainly most effective. The oral vaccine has the edge in that by the introduced virus settling in the bowel wall, it blocks the entry of the "wild" disease virus; thus it gives some immediate protection in an epidemic situation. This has to be boosted by two further doses for lasting immunity (around five years). A mass trial of American oral vaccine in Czechoslovakia, 1958-1960, in which over three million children took part seems to have been very successful: no poliomyelitis cases in the Republic in 1961. In 1962, the oral vaccine will be generally available in Britian.

Poliomyelitis Vaccination - Health Area 6 - Position at 31st. December, 1961.

No. of persons completed three dose course	-	10,837
Year of Birth 1956 - 1961	-	1,844
Year of Birth 1943 - 1955	-	6,051
Year of Birth 1935 - 1942	-	1,823
Born after 1933 and under 40 years of age	-	1,059
40+ but priority occupation	-	60

Note: Under 40's are entitled to poliomyelitis protection. Those over 40 at special occupational risk, for example ambulance drivers and nurses also qualify.

Children between 5 and 12 years of age are given an extra fourth dose. 2,731 such were given in 1961.

Measles.

Notifications were the highest ever recorded nationally: 762,391 cases; our contribution: 611. A vaccine is being developed against measles. It is as yet only capable of giving short lived immunity and has unpleasant side effects. But in a few years these snags should be overcome. The disease causes an immense amount of misery and discomfort, but the antibiotics have reduced its killing power and the complications of bronchopneumonia and middle ear disease are less dangerous now.

Diphtheria.

This disease is now rare. We had no notification this year. The national total was 180 cases. Before immunisation campaigns began in the 1940's, this country averaged 55,000 cases and 3,000 deaths from diphtheria annually. This staggering reduction is due to immunisation of the child population. There are always a few people who harbour the germ though apparently healthy, but always a danger to others. In consequence, it is essential to keep the immunity of our children high. There are signs that here unfamiliarity is breeding contempt for the proportion of children protected is not high enough. Among schoolchildren in Norfolk, 36% in 1959, 43% in 1960 and 53% in 1961 were reckoned fully protected. We hope this improvement can be maintained.

Diphtheria Immunisation - Health Area 6.

<u>Year of Birth.</u>	<u>Primary course completed in 1961.</u>	<u>Reinforcing Doses 1961.</u>
1961	138	-
1960	345	-
1959	98	11
1958	61	9
1957	35	13
1952 - 1956	266	670
1947 - 1951	211	639
	<u>1,154</u>	<u>1,342</u>

Whooping Cough.

This disease was not very prevalent in 1961. There were 24,691 cases notified in England and Wales and only 23 in this District. The disease is particularly severe in infants hence immunisation at 2 to 3 months old is advisable, with another shot at about 15 months to boost immunity.

Whooping Cough Immunisation - Health Area 6.

<u>Year of Birth.</u>	<u>Primary courses completed in 1961.</u>
1961	256
1960	216
1959	46
1958	36
1957	30
1952 - 1956	22
1947 - 1951	14
	<u>620</u>

Tetanus.

The tetanus bacillus produces a poison, the tiniest quantity being capable of setting the body muscles into such severe and continuing spasm that death from exhaustion is often the result. The germ is widely found in soil and manure. Hence the need for all engaged in farmwork being immunised: it is equally necessary for children.

Tetanus Immunisation - Health Area 6.

<u>Age.</u>	<u>Primary courses completed in 1961.</u>	<u>Reinforcing Doses in 1961.</u>
Under 16 years.	2,353	477
Over 16 years	<u>477</u>	<u>48</u>
	2,830	525

Food Poisoning.

Neither of these cases amounted to more than a brisk attack of diarrhoea. The first sufferer had spent his holidays making day trips to the coast with the family, eating at various cafes. No particular foodstuff was suspect and the other members of the family were not affected. The second case, earlier in the year, was a child who had diarrhoea for a few days but was not seriously upset by it. Again the family were healthy and could not give me any lead as to the source of infection.

Dysentery.

There were two cases, the first a schoolteacher who had been with a party of schoolchildren to London on a day trip. There had been dysentery in their School in Norwich. She became ill on her return home. Shortly after, her mother developed the illness. Both cases cleared up quite quickly after treatment. The organism responsible was Shigella-sonne, the least virulent of the dysentery bacteria.

Infectious Disease Notifications.

No one would pretend that these are complete for all diseases. For such diseases as whooping cough and measles, the returns are at least a sample of what is the real experience at any particular season. For such diseases as poliomyelitis where preventive measures can be brought into play few, if any, cases go unreported.

Infectious Disease Notification, 1961.

Scarlet Fever	11	Enteric fevers	0
Whooping Cough	23	Erysipelas	0
Poliomyelitis	1	Food poisoning	2
Measles	611	Tuberculosis	4
Diphtheria	0	Puerperal Pyrexia	0
Meningococcal infections	0	Ophthalmia Neonatorum	0
Acute pneumonia	17	Infective Hepatitis	0
Smallpox	0	Dysentery	2
Encephalitis	0	Anthrax	0

Housing and Welfare Responsibilities.

Our Local Government structure is such that County Council and District Council are each required to carry out particular duties and the respective areas of responsibility are defined in the statutes. Thus Welfare provisions are made by County Council. Housing, however, is the concern of the District Council. Liaison between the authorities is essential as there are problems of a welfare nature which arise out of housing difficulties.. An example of this is the excessive demand for welfare accommodation which exists in London in consequence of a desperate housing shortage. Here I am concerned with a much smaller problem but one almost equally difficult to resolve - the bad tenant who courts eviction and Welfare attention becomes necessary.

Eviction.

A Housing Authority has to manage the ratepayers property in a business-like fashion. Rents have to be collected when due; if arrears accumulate and are not recovered, the loss has to be made good by the ratepayers. If a tenant persistently fails to meet his rent obligation the District Council's duty is quite simply to replace him by someone who will pay his way. Eviction is the ultimate deterrent to the rent-shy, and at times the weapon has to be used. When it is the housing authority may receive unfavourable publicity. This they do not merit for eviction is only reluctantly ordered after an exercise of restraint in the face of provocation no private landlord would tolerate. Before the crisis comes, the Welfare authority is warned of the need for their services. Quite exceptional measures are taken through various social workers to avoid a break-up of the family concerned. The issue is complicated by such tenants often showing other undesirable traits. Such are the "problem families".

Problem Families.

Problem families are rather difficult to define. One definition is "families requiring a disproportionate amount of care, supervision and assistance from Welfare services". Perhaps a description would give the reader a better idea of the nature of the problem which these people can present. The circumstances here described do not of course apply to any particular real family but the elements are taken from life.

The knowing social worker calls at the house in the afternoon as mornings find the family abed. The overgrown garden with its collection of tins and broken bottles is in keeping with the chaos to be found indoors. Loud knocking is necessary for the television set is on maximum output. The chatelaine appears, so dishevelled that one suspects that she sleeps fully clad. Curlers are standard equipment and usually do not indicate that some gala occasion is in the offing. The visitor is admitted, with no apparent embarrassment to the householder that such a scene of disorder and neglect should be presented to a stranger. Wallpaper and paint are peeled off, plaster is broken, woodwork chipped and the windows cracked. The curtains although up for years are still held by drawing pins. The general impression is that this is not a home but merely a shelter taken over by rather scruffy campers. It is as well not to sit down for over the years the chairs have acquired a patina of mingled grease and dirt. Throughout the house there is an interesting odour compounded of these two elements with decomposing sweat and urine. The table bears the remnants of many scratch meals. The kitchen sports only a few pots and pans which are dirty or rusty, or both. In the larder are bread and jam and precious little else. Upstairs the beds are left unmade all day and often the children's mattresses not dried out after being soaked. Throughout the inspection mother and youngest child are locked in an embrace. Alas the foul napkins and lack of food in the house suggest that this mother-love is a poor thing which does not show itself in any practical expression requiring effort.

The husband, if such there be, is usually equally feckless and inadequate for all purposes other than procreation. He is above all careful not to make a habit of working for a living.

What is done by welfare to reclaim such families ? Home Helps assist in cleaning up the mess. Some are also able to teach simple cookery and attempt to create in the house a more orderly way of living. If there is some response to this training, it can be followed by the mother and children spending a few weeks at a residential centre where housecraft is taught. I have known this effect great improvement but only when the husband was made of better stuff than his wife and could help to ensure that the new standards were kept up on her return home.

Arrangements can be made for rent to come direct from the National Assistance Board or through the Welfare Officer. Some of the remaining relief may be paid in kind to curb foolish spending. The man of the house can sometimes be shamed into regular work. Bedding and children's clothes come from such agencies as the children's department and W.V.S. All too often these efforts produce only temporary improvement and even this slight. Eviction follows and the family if unable to find a suitably weak-minded landlord have to be sheltered in welfare homes.

The reader may wonder at the expenditure of such time and trouble if the prospects of remedying the fault are so poor. Quite simply the reason is - for the children's sake. Even in the worst home a child derives security from his emotional attachment to his mother. This is still true no matter how slatternly and inept she may be. To deprive a child of maternal affection is therefore a grave matter. This is why social workers are prepared to spend endless hours cajoling apparently worthless parents to make some sort of a home for the children. The community loses nothing by the delay which these efforts at rehabilitation cause. The ratepayer/taxpayer is here in a position where he can't win. He has to maintain people like these in one way or another. This being so, it might be reasonable to expect the County Council to underwrite rent loss and excessive repair bills where but for these the District Council might be willing to postpone eviction. After all, the housing authority thereby removes an expensive call on welfare accommodation.

Housing Act, 1961.

The Housing Act, 1961, deals mainly with financial matters such as conditions and levels of subsidy from the Exchequer, and makes minor alterations to previous Housing Acts. Some measure of control is now given over houses let off in lodgings or shared by several families. The housing authority can now require a reasonable standard of management and of basic amenities and enforce these.

Water.

The supply is adequate and satisfactory as to quality. Chemical and bacteriological tests of purity are done at intervals. (Details: Water Engineer's Report). Mains water is piped to all parishes except Illington and Kilverstone which are supplied by private schemes. In all 5,588 dwellings have mains water. This leaves 600 houses relying on private resources, pumped or fetched from wells. Checks on the possible pollution of these are made, details of such inspections are given in the Public Health Inspectors section of this report.

Sewage and Sewerage.

The arrangements on this District are far from satisfactory. The Watton works and Attleborough works too, are overloaded - with the inevitable poor effluent which results from this. Schemes are in hand to extend the disposal works at Watton at a cost of some £60,000, and Attleborough at about £300,000. Use is made of the former Air Ministry Sewerage and Works at Deopham Green and Snetterton airfields to serve houses nearby. Smaller works serve blocks of Council Houses in various parishes. Cesspit and septic tank in the higher rated properties, and pail closets in the lower rated are the rule elsewhere.

Those areas with most concentration of population must be served next :- East Harling, Kenninghall, Banham, New Buckenham.

The Night Soil Collection Service will be extended in 1962, it will be welcome certainly, but is a poor substitute for a sewage scheme.

Appendix A - Health and Welfare Services provided by Norfolk County Council.

These include the care of mothers and young children; supervision of the health of the schoolchild; immunisation against diphtheria, poliomyelitis etc; home nursing and midwifery; home help service; advice on the care of those handicapped physically or mentally. Information of such services may be had from the Local Health Office, Tanner Street, Thetford, Telephone 3286 and 3341.

Appendix B - Derivation of Statistical Rates.

Adjusted Birth Rate: $(\text{Live births per 1000 population}) \times \text{comparability factor for births.}$

Adjusted Death Rate: $(\text{Deaths per 1000 population}) \times \text{comparability factor for deaths.}$

Comparability factors: Allow for variation between areas e.g. in the proportion of women of reproductive age and in the age/sex structure of population.

Infant Mortality Rate: Deaths at under 1 year per 1000 live births.

Legitimate I.M.R.: Deaths of legitimate infants per 1000 legitimate live births.

Illegitimate I.M.R.: " " illegitimate " " " illegitimate " "

Maternal Mortality Rate: Deaths attributable to pregnancy per 1000 total births.

Stillbirth Rate: Stillbirths per 1000 total births.

Pernatal Mortality Rate: $(\text{Stillbirths and Early Neonatal Deaths}) \text{ per 1000 total births.}$

Neonatal Mortality Rate: Deaths at under 4 weeks per 1000 live births.

Early Neonatal Mortality Rate: Deaths at under 1 week per 1000 live births.

Appendix C. - Comparisons with Previous Years.

	1961.	1960.	1959.	1958.	1957.	1956.
Estimated Population	19,970	19,500	19,210	19,640	19,740	19,740
Total Births	304	313	330	352	321	315
Total Deaths	173	171	202	200	193	219
Birth Rate (Crude)	15.0	17.0	17.2	17.9	16.3	15.9
Death Rate (Crude)	8.7	8.7	10.4	10.2	9.8	11.1
Infant Deaths	4	3	5	10	11	2
Infant Mortality Rate	13.4	9.6	15.0	28.4	34.3	6.4
Stillbirths	5	3	4	5	14	15
Stillbirth Rate	16.4	9.7	12.0	16.8	41.8	45.4

REPORT OF PUBLIC HEALTH INSPECTOR.

Mr. Chairman, My Lords, Ladies and Gentlemen,

I have the honour to present my eleventh Annual Report in respect of the year 1961, during which a total of 3,704 inspection visits were made for all purposes.

It is regrettable that again this year, after seven and a half years of increasing difficulties, arising from expanding throughput and extended days and times of slaughtering, I have to report that, despite the appointment of an additional Public Health Inspector, there is little prospect of meeting the demands for an adequate meat inspection service.

A comprehensive report prepared at the close of the year showed that the throughput of animals had reached a total of about 105,000, approximately 90,000 of them at one slaughterhouse.

When it is realised that about 50% of those animals were slaughtered outside normal working hours the enormity of the task facing Local Authorities and their Officers is not difficult to assess.

Having experienced this ever-increasing problem, since the de-control of slaughtering in July, 1954, I cannot share the optimism of those who predict adequate coverage as a result of new legislative compulsion unless it provides for (a) control of days and times of slaughtering, (b) adequate rewards for the job (comparable with those available for the same job outside local government service) and (c) reasonable hours of duty.

The most serious aspect of this problem is that one third of the total inspection visits were made to slaughterhouses, which in terms of time absorption means that about one half of the available inspectorate is required for this duty to the detriment of execution of other vital public health functions.

It is gratifying to be able to report that for five months of the year no action was necessary in connection with notifiable diseases.

WATER SUPPLIES.

During the year seven well supplies, involving eight properties, were sampled and only one was found to be satisfactory.

Two of the unsatisfactory ones were closed and connections made to the Council's mains. In a third case distance precluded the possibility of connecting to a mains supply and water is transported in bulk to meet the needs of the household and in one case a new borehole supply was provided.

In the remaining three cases negotiations were in progress at the end of the year with a view to extension of the mains supply.

Whilst the enormous benefits of comprehensive mains water coverage of the District are underlined by the continued reduction in the number of problems arising from polluted shallow wells it cannot be denied that new problems inevitably arise in connection with sewage disposal in villages where the absence of sewage disposal schemes results in foul ditches, polluted streams and sewage-soaked gardens.

SEWER DITCHES.

Approximately five and a half miles of these ditches are maintained by the Department and in most cases the ditches have not sufficient gradient to be even partially self-cleansing. This factor, particularly in periods of drought, gives rise to complaints of serious nuisance.

SEWERAGE.

Reports on samples taken by the River Pollution Prevention Officer showed results as follows :-

- | | | |
|-----------------------------------|---|---|
| (a) Watton Sewage Disposal Works | - | Three taken -
all unsatisfactory. |
| (b) Attleborough " " | - | Three taken -
1 Good, 1 Fair,
1 Unsatisfactory. |
| (c) Old Buckenham " " | - | One taken - Good. |
| (d) Gt. Ellingham " " | - | Three taken -
All unsatisfactory. |

The Watton Scheme has been in use about seven years and sampling results have indicated that it is already overloaded, plans are in hand for enlarging the works.

A new sewerage scheme is in course of preparation for the Parish of Attleborough and at the converted ex Air Ministry disposal works at Great Ellingham remedial measures have been undertaken in an effort to improve the efficiency of the plant which deals with cesspool emptyings and night-soil from the District.

Sewer extensions have been carried out as follows :-

(a) Exchange Street, Attleborough (Rear of)-

New rider sewer, which will form part of the new scheme, laid to serve private properties in urgent need of the service and old peoples' dwellings in course of erection.

(b) Norwich Road, Watton.

Extension of sewer and ejector station to serve new private development and part of installations at Watton R.A.F. Station.

(c) Merton Road, Watton.

Sewer extension to serve new private development adjoining the Council's Housing Estate.

(d) Dereham Road, Watton.

Sewer extension and ejector station serving new private development on the north side of Watton.

At Watton forty-three and at Attleborough, four, properties were connected to the sewers.

DRAINAGE OF BUILDINGS.

Advice has been given and remedial work supervised in connection with the improvement of defective drainage systems at thirty-five private properties.

CESSPOOL EMPTYING.

Unduly heavy demands were made on this service during the year and a report to the Public Health Committee in April revealed that in the first quarter of the year a loss of approximately £130 was incurred, whilst the value of free emptyings during the same period amounted to £170.

COLLECTION AND DISPOSAL OF NIGHT-SOIL.

Completion of the sewerage scheme extensions enabled the Council to withdraw the collection service from the parish of Watton, (with the exception of those properties already covered by the collection and situated where the sewer is not available) and to extend the collection to the parish of Carbrooke.

Small areas of other parishes were also added to the collection scheme during the year.

In connection with proposals to extend the service to other parishes in greatest need, a report was prepared covering estimates of costs, details of collection areas etc.

COLLECTION AND DISPOSAL OF REFUSE.

A comprehensive report was submitted relating to the paper sack system of refuse collection and it was decided that the capital and operational costs were too high to permit the adoption of even a pilot scheme at present.

This system, eliminating all the undesirable features of the unhygienic, traditional method, is already receiving widespread approval and it is hoped that rapidly increasing adoption of the system will result in reductions in production costs of paper sacks and fittings.

Fires at the Crows Hall refuse dump were dealt with by the refuse staff on ten occasions during the year.

Consideration was given to the replacement of the ex Air Ministry building used to house the collection vehicles, by a permanent building at the depot at Great Ellingham.

By arrangement with the Highway Authority the Council undertook the emptying of twenty-four refuse bins in lay-bys on the A.11 trunk road.

Salvaged materials sold realised a total of £17. 10s. 10d.

FOOD

Again this year, the topic which looms largest is that of meat inspection. The following table emphasises the problem referred to in my introduction to this report :-

	<u>Cattle</u> <u>Excluding</u> <u>Cows.</u>	<u>Cows.</u>	<u>Calves.</u>	<u>Sheep</u> <u>and</u> <u>Lambs.</u>	<u>Pigs.</u>	<u>Sows.</u>	<u>Boars.</u>	<u>Totals.</u>
Number inspected.	2844	583	154	9319	14271	1537	226	28934
" " (1960)	(2171)	(624)	(204)	(7216)	(10193)	(1203)	(122)	(21,733)
<u>All diseases</u> <u>except</u> <u>Tuberculosis &</u> <u>Cysticerci.</u>								
Whole carcasses condemned.	6	8	4	3	66	13	2	102
Carcases of which some part or organ was condemned.	307	200	3	35	305	2	5	857
<u>Tuberculosis</u> <u>only.</u>								
Whole carcasses condemned.						2		2
Carcases of which some part or organ was condemned.	8	10			104	34	5	161
<u>Cysticercosis</u>								
Carcases of which some part or organ was condemned.	29	2						31
Carcases submitted to treatment by refrigeration.	2							2
Generalised and totally condemned.								—.

WEIGHT CONDEMNED.

Edible Offal	11,013 lbs.
Meat	18,012 lbs.
	<hr/>
Total	29,025 lbs.
	<hr/> <hr/>

A total of 1261 visits were made to the five slaughterhouses in use within the District, 1179 of them during normal working hours, 10 late in the evening, 1 early in the morning, 2 on Saturday evenings and 69 on Sundays.

Intensive inspection tests were carried out at Watton Abattoir, (where about 90,000 animals were killed) and results showed that one inspector employed full-time could achieve only approximately 40% to 50% inspection and that, at this establishment alone, two inspectors would be required to achieve 100% inspection and only then if they fitted their hours of duty to the operational schedules of the Abattoir.

This would entail coverage from 6 a.m. to about 7.30 p.m. on four days of the week, (including Saturdays) from 6 a.m. to about 2.30 p.m. on Sundays and in the pre-Christmas period, greatly extended periods of coverage.

Two suspected cases of Anthrax occurred (one of which was confirmed) both in cattle brought into the slaughterhouse.

In the confirmed case the animal was bled on a farm and the carcase sent to the slaughterhouse under a veterinary practitioners certificate.

It is gratifying to be able to report that in general there is a very keen awareness of the dangers of anthrax on the part of slaughterhouse owners and staff and arrangements are made with medical practitioners for the treatment of all contacts of suspected carcases without delay.

At the same time there seems to be a marked reluctance on the part of veterinary practitioners and owners alike to conform to the provisions of the Regulations relative to the removal of carcases to a slaughterhouse.

Not one of the certificates furnished by veterinary practitioners has conformed entirely with the requirements of the legislation.

The standard of hygiene in the transport of meat has continued to improve and in most cases this is true of the handling of meat at slaughterhouses.

Three of the five slaughterhouses in the District satisfy the constructional requirements of the Regulations and at the remaining two major reconstruction work is in hand.

Six new licences to slaughter animals were approved during the year. Of these, three were full licences and 3 were "provisional".

A total of 169 lbs. of various foodstuffs was condemned as unfit for human consumption.

Two shops were registered in respect of the storage and sale of pre-wrapped ice-cream.

Two new registrations of Distributors of Milk were approved.

INSPECTIONS AND OTHER NOTIFIABLE DISEASES.

Yet again the year has produced an extremely low incidence of infectious and other diseases requiring attention by the Department.

Five cases of Scarlet Fever, two cases of Dysentery, one case of Salmonella Enteritis, one suspected case of Weil's Disease (not confirmed) and three cases of food poisoning were investigated and appropriate action taken to prevent spread of infection.

DISINFESTATION OF PREMISES.

One infestation of a dwelling house by fleas and two by cluster flies were dealt with during the year.

RODENT CONTROL.

This service, free of charge to domestic premises, continued satisfactorily despite the absence of one of the two operators for two months, due to illness.

Favourable comment on the efficiency of the service was frequently received.

The following table summarises activities under this heading :-

	<u>Non-Agricultural</u>			<u>Agricultural.</u>	
	<u>Local Authority</u>	<u>Dwelling Houses</u>	<u>Business and other Premises.</u>	<u>Total of Cols.(1) (2)&(3).</u>	
Number of properties in Local Authority's District	32	5321	606	5959	564
Total number of properties inspected.	31	3984	308	4323	224
Number of such properties found to be infested by:-					
Major	1	30	6	37	7
<u>Rats</u> Minor	19	2984	119	3122	126
Major	-	3	-	3	-
<u>Mice</u> Minor	-	58	21	79	-
Total inspections carried out including re-inspections.	36	4600	333	4969	225
Number of <u>infested properties</u> , treated by the L.A.	10	2996	82	3088	46
Total treatments carried out - including re-treatments.	10	3011	82	3103	46
Number of "Block" control schemes carried out.	562.				

COMPLAINTS.

Complaints received covered a wide range of topics including, deposit of manure on highway verge, numbers of cats in dwelling houses, foul ditches and streams, insanitary poultry and pig premises and a finger dressing in a confection.

Human behaviour is most interesting when complaints arise particularly when it involves the "don't mention my name" type of complaintant.

One case of nuisance from noise and dust from broiler houses was remedied following service of a statutory notice under Section 93 of the Public Health Act.

HOUSING

Little progress was made during the year on the slum clearance survey, which was commenced in the parishes of Attleborough, Banham and Besthorpe.

This is one of the really important statutory duties which should not be retarded by the inspection of meat for export out of the District.

Two Certificates of Disrepair were dealt with, one case involving the cancellation of a certificate following an objection to cancellation by the tenant, and in the second one, the owner gave an undertaking in accordance with the Act.

Two dangerous structures demanded attention, one a building at North Lopham which the owner demolished and the other a dangerous roof at Watton which the owners repaired and rendered safe.

CARAVANS.

Owners of residential sites were informed as to the requirements under the new legislation and in some cases remedial work was put in hand.

The problem of individual caravan sites was still with us, resulting in the main from lack of service families accommodation at the Royal Air Force Station.

Proposals are afoot to provide families accommodation on a large scale, within the District, and will, it is hoped, do much to improve the position.

PUBLIC CONVENIENCES.

It is regrettable that I have to report that acts of vandalism are on the increase and as a result these public amenities have to be reduced to basic necessities, it having being necessary to remove wash-basins, slot machines and even proper flushing cistern chains.

At Watton the cubicle door panels were kicked in and coin locks damaged beyond repair.

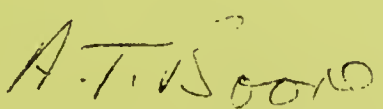
PETROLEUM INSTALLATIONS.

Eight new storage tank and pump installations were inspected and passed as satisfactory in accordance with the Model Code.

ACKNOWLEDGEMENT.

Again this year I record, with appreciation, the very loyal support of the staff of the Department, particularly that of the Additional Public Health Inspector, Mr. A.E. Sheldrake.

The consideration of the Council and the pleasant co-operation of other officers is gratefully acknowledged.


Senior Public Health Inspector.

WAYLAND RURAL DISTRICT COUNCIL : WATER DEPARTMENT.

REPORT OF THE WATERWORKS ENGINEER FOR THE YEAR 1961.

Mr. Chairman, My Lords, Ladies & Gentlemen,

I beg to submit my report for the year ending 1961.

The total amount of water raised and treated during the year was 254,021,674 gallons, a daily average of some 695,949 gallons.

The treatment plants at Riddlesworth and Watton Pumping Stations are now fully operational.

180 premises and farms have been connected to the mains supply during the year.

The connections in each Parish are as follows :-

	<u>Domestic</u>	<u>Meter.</u>
Attleborough	921	128
Banham	238	69
Besthorpe	115	28
Blo Norton	53	29
Brettenham	32	4
Bridgham	60	11
Buckenham New	130	12
Buckenham Old	247	63
Carbrooke	130	35
Caston	88	25
Croxton	66	11
Eccles/Hargham/Quidenham/Wilby	129	36
Ellingham Little	61	28
Ellingham Great	159	44
Garboldisham	141	34
Griston	50	15
Harling	290	49
Hockham	97	18
Kenninghall	226	56
Larling/Roudham	56	31
Lopham South	129	36
Lopham North	92	40
Merton	40	8
Morley	9	2
Ovington	36	16
Riddlesworth/Gasthorpe	36	14
Rockland	130	39
Scoulton	50	25
Shropham	56	15
Snetterton	36	14
Stow Bedon/Breckles	64	30
Thompson	72	11
Watton	682	71
Wretham	35	8
	<u>4,756</u>	<u>1,055</u>

In view of the possible development in building in the areas of Attleborough, Watton and Harling, a request has been made to be allowed to lay an 8" main from Kenninghall Water Tower to a point near Eccles Hall School, and join into the existing mains supply at that point.

LINCOLNE SUTTON & WOOD LTD.

Cert. No. M.1300.

Lab. No. 2684/W.

19th. September, 1961.

CERTIFICATE OF ANALYSIS OF WATER.

Sample received 7th. September, 1961 from Wayland R.D.C.
Marked - Softener House, Riddlesworth Pumping Station.
Appearance when received - Clear, trace of green deposit.
Colour - Nil. Odour - Nil.
Reaction - Faintly alkaline pH 7.6 Taste - Satisfactory.

RESULTS OF CHEMICAL ANALYSIS IN PARTS PER MILLION.

Ammoniacal nitrogen	nil	Hardness as CaCO_3 :	
Albuminoid nitrogen	nil	Total	90
Nitrate nitrogen	2	Carbonate (temporary)	90
Nitrite nitrogen	nil	Non-carbonate (permanent)	nil
Chlorine as chlorides	28	Alkalinity as Ca_2CO_3 :	240

BACTERIOLOGICAL RESULTS.

Number of colonies developing per ml. in 48 hrs. at 37°C .	nil.
Presumptive coliform organisms-Probable No. per 100 ml.	nil.
B. Coli Type 1 ("Faecal")	-

OPINION.

This water is of very good organic purity and its bacteriological condition is excellent. It has been partially softened, the residual hardness being approximately $6\frac{1}{2}$ Clark. In our opinion this water is fit for drinking and general purposes.

for Lincolne Sutton & Wood Ltd.

Eric C. Wood.

LINCOLNE SUTTON & WOOD LTD.

Cert. No. M.1301
Lab. No. 2685/W.

19th. September, 1961.

CERTIFICATE OF ANALYSIS OF WATER.

Sample received 7th. September, 1961 from Wayland R.D.C.
Marked - Softener House, Old Buckenham Pumping Station.
Appearance when received - Clear. Nature of deposit - Nil.
Colour - Nil. Odour - Nil.
Reaction - Alkaline pH 8.8 Taste - Satisfactory.

RESULTS OF CHEMICAL ANALYSIS IN PARTS PER MILLION.

Ammoniacal nitrogen	0.02	Hardness as CaCO_3 :	
Albuminoid nitrogen	0.02	Total	165
Nitrate nitrogen	1.0	Carbonate (temporary)	130
Nitrite nitrogen	0.04	Non-carbonate	35
Chlorine as chlorides	36	(permanent)	
		Alkalinity as CaCO_3 :	130

BACTERIOLOGICAL RESULTS.

Number of colonies developing per ml. in 48 hrs. at 37°C.	2
Presumptive coliform organisms-Probable No. per 100 ml.	nil.
B. Coli Type 1 ("faecal")	

OPINION.

This water is of very good organic quality and its bacteriological condition is excellent. The total hardness is approximately $11\frac{1}{2}$ Clark of which 9° is temporary. In our opinion this water is fit for drinking and general purposes.

for Lincolne Sutton & Wood Ltd.

Eric C. Wood.

LINCOLNE SUTTON & WOOD LTD.

Cert No. N.261.
Lab. No. 3048/W.

18th. December, 1961.

CERTIFICATE OF ANALYSIS OF WATER.

Sample received 13th. December, 1961 from Wayland R.D.C.

Marked - Watton Waterworks.

Appearance when received - Clear.

Nature of deposit - Nil.

Colour - Nil.

Odour - Nil.

Reaction - Faintly alkaline pH 7.5

Taste - Satisfactory.

RESULTS OF CHEMICAL ANALYSIS IN PARTS PER MILLION.

Ammoniacal nitrogen	0.12	Hardness as CaCO_3 :	
Albuminoid nitrogen	0.02	Total	90
Nitrate nitrogen	1.5	Carbonate (temporary)	-
Nitrite nitrogen	nil	Non-carbonate (permanent)	-
Chlorine as chlorides	30	Alkalinity as CaCO_3 :	295

BACTERIOLOGICAL RESULTS.

Number of colonies developing per ml. in 48 hrs. at 37°C.	1
Presumptive coliform organisms-Probable No. per 100 ml.	-
B. Coli Type 1 ("faecal")	-

OPINION.

Previous analyses of this water, see for example our Cert. M.286 of the 19th. December, 1960, show this water to have been unsoftened. The present sample has clearly been softened to a residual total hardness of between 6° and 7° Clark. It has a somewhat high content of ammoniacal nitrogen as compared with previous samples. There is also differences in the nitrate and chloride content. There is no evidence of pollution, however, and the bacteriological condition of the water is very satisfactory. In our opinion it is fit for drinking purposes.

for Lincolne Sutton & Wood Ltd.,

Eric C. Wood.

